## FORM D

SEG Mail Processing Section

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

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Ib NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,

© SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number:	3235-0076					
Expires:	May 31, 2008					
Estimated aver	rage burden					
hours per respon	rse . 16.00					

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DA	TE RECEIVI	ED

Name of Offering( check if this is an amendment and name has changed, and indicate change.)  Convertible Promissory Note Financing	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4 Type of Filing: New Filing Amendment	PROCESSED
A. BASIC IDENTIFICATION DATA	JUN 1 2 2008
1. Enter the information requested about the issuer	THOMSON RELITEDS
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  NightRiot Corporation	THE STATE OF THE S
Address of Executive Offices (Number and Street, City, State, Zip Code 1514 NW 59th Street, Seattle, WA 98107	Telephone Number (Including Area Code) (516) 384-2900
Address of Principal Business Operations (Number and Street, City, State, Zip Code (if different from Executive Offices)	Telephone Number (Including Area Code)
	er (please specify 08047572
business trust limited partnership, to be formed Month Year	<del></del>
Actual or Estimated Date of Incorporation or Organization:    O 7	

## **GENERAL INSTRUCTIONS**

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

#### Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer □ Director Promoter General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Juster, Joshua Business or Residence Address (Number and Street, City, State, Zip Code) 1514 NW 59th Street, Seattle, WA 98107 Executive Officer Beneficial Owner Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Khadavi, Jeff Business or Residence Address (Number and Street, City, State, Zip Code) 1514 NW 59th Street, Seattle, WA 98107 Executive Officer General and/or Check Box(es) that Apply: Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Kothari, Devang Business or Residence Address (Number and Street, City, State, Zip Code) 1514 NW 59th Street, Seattle, WA 98107 Beneficial Owner Executive Officer Director Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Hakakian, Khosro Business or Residence Address (Number and Street, City, State, Zip Code) 1514 NW 59th Street, Seattle, WA 98107 Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer Beneficial Owner Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

A. BASIC IDENTIFICATION DATA

## A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer Director General and/or Promoter Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) General and/or Promoter Beneficial Owner **Executive Officer** Director Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Director Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

	_			B. IN	FORMAT	ION ABOU	JT OFFER	ING				
											Yes	No
1. Has th	•							$\boxtimes$				
Answer also in Appendix, Column 2, if filing under ULOE.							# NT/A					
2. What is the minimum investment that will be accepted from any individual?							\$ N/A Yes	No				
<ol> <li>Does the offering permit joint ownership of a single unit?</li> <li>Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.</li> </ol>								fly, any ffering. a state	<b>~</b>			
Full Name	Full Name (Last name first, if individual)											
Business or Residence Address (Number and Street, City, State, Zip Code)												
Name of A	ssociated Br	oker or Deal	er			<del>-</del>			<u> </u>	<del></del> -	······	<del></del>
States in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Purc	hasers						<del></del>
(Cl	neck "All Sta	tes" or check	c individual	States)			· · · · · · · · · · · ·				🗆 A	all States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN DK WI	HI MS OR WY	MO PA PR
Full Name	(Last name		idual)		لسسا		<b></b> J				_	
Business o	r Residence	Address (Nu	mber and S	Street, City.	State, Zip (	Code)			_		····	
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	Vhich Person										<b>—</b>	
(Cl	neck "All Sta			I States)	_					_		All States
AL IL MT RI	AK IN NE SC	AZ IA VV SD	KS NH TN	CA KY NJ TX	LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN DK WI	MS OR WY	MO PA PR
Full Name	(Last name	first, if indiv	idual)									
Business o	r Residence	Address (Nu	ımber and S	Street, City,	State, Zip (	Code)					<u> </u>	·
Name of A	ssociated Br	oker or Dea	ler				<u> </u>		•		·	
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IL	[IN]	IA I	KS]			ME]			<u> </u>	рк	OR OR	MO PA
MT RI	NE SC	SD	NH TN	TX	NM UT	VT	NC VA	ND WA	он wv	wi J	WY	PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box  and indicate in the columns below the amounts of the securities offered for exchange and		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt\$	2.000.000	s 1,330,000
	Equity\$		
	☐ Common ☐ Preferred		
	Convertible Securities (including warrants)		¢
	Partnership Interests		
	Other (Specify)		
	Total\$		
	Answer also in Appendix, Column 3, if filing under ULOE.	2,000,000	\$ 1,550,000
_	· · · · · · · · · · · · · · · · · · ·		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	16	\$1,330,000
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		s
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		s
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		s 25,000
	Accounting Fees	<u>—</u>	\$
	Engineering Fees		s
	Sales Commissions (specify finders' fees separately)		\$
	Other Expenses (identify)		\$
	Total	-	

	C. OFFERING PRICE, NUM	IBER OF INVESTORS, EXPENSES AND USE OF F	ROCEEDS		
	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C — proceeds to the issuer."	- Question 4.a. This difference is the "adjusted gross		s	1,975,000
i.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for an check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	by purpose is not known, furnish an estimate and of the payments listed must equal the adjusted gross			
			Payments to Officers, Directors, & Affiliates	Pa	syments to Others
	Salaries and fees	[	s	□ \$_	
	Purchase of real estate	[	s	□ \$ _	
	Purchase, rental or leasing and installation of mac		s		
	Construction or leasing of plant buildings and fac	ilities	s	□ s	
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso issuer pursuant to a merger)	ets or securities of another			
	Working capital	[	s	⊠ s	1,975,000
	Other (specify):		s	<b>\$</b>	
	· · · · · · · · · · · · · · · · · · ·		s	□ \$_	
	Column Totals	[	s <u></u>	⊠ s_	1,975,000
	Total Payments Listed (column totals added)	<b>⊠</b> \$	1,975,	000	
		D. FEDERAL SIGNATURE			
igi	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-accr	nish to the U.S. Securities and Exchange Commiss	sion, upon writter		
SS	uer (Print or Type)	Signature	Date		<del></del>
۷iį	ghtRiot Corporation	Jospes Khedan	06/03/2008		
۷a	me of Signer (Print or Type)	Title of Sigher (Print or Type)	<u> </u>		<del></del>
ef	f Khadavi	Secretary			
		<del>'</del>			

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

